



PART B - FEE(S) TRANSMITTAL

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27215 7590 09/28/2007

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10/11/2007 FMETEK12 00000141 133085 10716986

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Valarie A. Young	(Depositor's name)
<i>Valarie A. Young</i>	(Signature)
10-11-07	(Date)

01 FC: APPLICATION NO. 20070141 DA FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
02 PCT-1450	Daniel Grier Osborne	PTO-1439	7590
03 FC: 80010/716,986 3.00 DA 11/19/2003			

TITLE OF INVENTION: PNEUMATIC TIRE CROWN REINFORCEMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	12/28/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
STORMER, RUSSELL D	3617	152-526000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 E. Martin Remick
2 Frank J. Campigotto
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Michelin Recherche et Technique S.A., Granges-Paccot, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies One

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

A check is enclosed.
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The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-3085 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Frank J. Campigotto

Date 11- Oct-07

Typed or printed name Frank J. Campigotto

Registration No. 48,130

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